

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

1. (a) Name of Individual, Organization or Corporation No Labels		3. FEC Identification Number <div style="border: 1px solid black; padding: 5px; display: inline-block;"> C C90015330 </div>
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1130 Connecticut Avenue NW, Suite Suite 325		
(c) City, State and ZIP Code <div style="display: flex; justify-content: space-between;"> Washington DC 20036 </div>		
2. Occupation and Name of Employer (for Individual Filers Only)		

6150.00

FEC Schedule 5 (REV. 09/2013)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 2 OF 2
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

No Labels

Full Name (Last, First, Middle Initial) of Payee

King Strategic Communications

Date of Public Distribution/Dissemination

MM / DD / YYYY
03 / 15 / 2018

Mailing Address 750 Cross Pointe Road, Ste N

Amount

City State Zip Code
Gahanna OH 43230

6150.00

Transaction ID : F57.000001

Purpose of Expenditure
Door Hangers and Literature HandoutsCategory/
Type 003Office Sought: ☒ House State: IL
☐ Senate District: 03
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Lipinski, Daniel, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 20189.75Disbursement For: ☒ Primary ☐ General
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Date of Public Distribution/Dissemination

Mailing Address

MM / DD / YYYY

Amount

City State Zip Code

Purpose of Expenditure

Category/
TypeOffice Sought: ☐ House State: _____
☐ Senate District: _____
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office SoughtDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Date of Public Distribution/Dissemination

Mailing Address

MM / DD / YYYY

Amount

City State Zip Code

Purpose of Expenditure

Category/
TypeOffice Sought: ☐ House State: _____
☐ Senate District: _____
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office SoughtDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 6150.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures.....▶ 6150.00
(carry total from last page forward to Line 7)